

1 By Supervisors Romo West & Lipscomb

2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44

A RESOLUTION

Supporting legislative efforts to fund and expand the Treatment, Alternative and Diversion (TAD) grant program.

WHEREAS, the Treatment, Alternative and Diversion (TAD) grant program enables counties to establish treatment programs that provide alternatives to prosecution and incarceration for offenders who abuse alcohol or other drugs; and

WHEREAS, judges, prosecutors, human service professionals, law enforcement, corrections officials and others work together to develop and implement local TAD projects; and

WHEREAS, each county has the flexibility to decide what type of projects it will undertake and which offenders will be targeted and all TAD projects assess offenders' criminal risk, determine their treatment needs, and then continually measure the offenders' progress; and

WHEREAS, Milwaukee County is one of nine counties currently operating TAD projects and Milwaukee County utilizes the diversion/deferred prosecution project; and

WHEREAS, TAD programs are proven to save money in future incarceration costs and reduce crime; and

WHEREAS, a study found that 76% of TAD participants had not been convicted of a new offense within one year of completing the programs; and

WHEREAS, funding was increased in the 2013-15 budget by \$1 million annually for TAD projects statewide, now, therefore

BE IT RESOLVED, Milwaukee County supports state legislative efforts to improve and expand the TAD program; and

BE IT FURTHER RESOLVED, Milwaukee County supports legislative efforts to fund TAD projects throughout the entire criminal justice system, increase flexibility in targeting offenders, and increase intervention outcomes through a Criminal Justice Coordinating Council utilizing evidence based practice and cost-benefit analysis.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: December 9, 2013

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: A resolution supporting legislative efforts to fund and expand the Treatment, Alternative and Diversion (TAD) grant program.

FISCAL EFFECT:

- | | |
|---|--|
| <input type="checkbox"/> No Direct County Fiscal Impact
<input checked="" type="checkbox"/> Existing Staff Time Required
<input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below)
<input type="checkbox"/> Absorbed Within Agency's Budget
<input type="checkbox"/> Not Absorbed Within Agency's Budget
<input type="checkbox"/> Decrease Operating Expenditures
<input type="checkbox"/> Increase Operating Revenues
<input type="checkbox"/> Decrease Operating Revenues | <input type="checkbox"/> Increase Capital Expenditures
<input type="checkbox"/> Decrease Capital Expenditures
<input type="checkbox"/> Increase Capital Revenues
<input type="checkbox"/> Decrease Capital Revenues
<input type="checkbox"/> Use of contingent funds |
|---|--|

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	
	Revenue	0	
	Net Cost	0	
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated.¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.
 - A. Supporting legislative efforts to fund and expand the Treatment, Alternative and Diversion (TAD) grant program.
 - B. N/A
 - C. N/A
 - D. No assumptions made.

Department/Prepared By CB/ Weddle

Authorized Signature _____

Did DAS-Fiscal Staff Review? Yes No

Did CBDP Review?² Yes No Not Required

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

² Community Business Development Partners' review is required on all professional service and public work construction contracts.

1 By Supervisor Romo West

2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46

A RESOLUTION

In support of various State Assembly and Senate Bills related to mental health service in Milwaukee County.

WHEREAS, Milwaukee County’s mental health system is a vital and important component and safety net; and

WHEREAS, additional evidence based programs and more robust funding can always be utilized to serve residents; and

WHEREAS, the following State legislation provides for enhanced possibilities for Milwaukee County residents and Milwaukee County’s mental health system; and

WHEREAS, Assembly Bill 450/Senate Bill 362 relating to providing grants for crisis intervention team training; and

WHEREAS, Assembly Bill 452/Senate Bill 359 pertain to the creation of a child psychiatry consultation program to assist participating clinicians in providing enhanced care to pediatric patients with mild to moderate health care needs; and

WHEREAS, Assembly Bill 455/Senate Bill 368 pertains to grants for peer-run respite centers, an innovative service delivery designed to improve quality of life and reduce emergency room visits and are delivered by people who themselves have been successful in the recovery process; and

WHEREAS, Assembly Bill 457/Senate Bill 374 pertain to grants to counties that offer treatment and diversion programs to persons with mental illnesses; and

WHEREAS, Assembly Bill 459/Senate Bill 409 pertain to individual placements and support programs for employment of individuals, now, therefore

BE IT RESOLVED, the Milwaukee County Board of Supervisors hereby express support for Assembly Bill 450/Senate Bill 362, Assembly Bill 452/Senate Bill 359, Assembly Bill 455/Senate Bill 368, Assembly Bill 457/Senate Bill 374, and Assembly Bill 459/Senate Bill 409; and

BE IT FURTHER RESOLVED, that upon adoption, the Milwaukee County Clerk is authorized and directed to send copies of this resolution to members of the State Assembly and State Senate.

MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: December 9, 2013

Original Fiscal Note

Substitute Fiscal Note

SUBJECT: A resolution in support of various State Assembly and Senate Bills related to mental health service in Milwaukee County.

FISCAL EFFECT:

- | | |
|--|--|
| <input type="checkbox"/> No Direct County Fiscal Impact | <input type="checkbox"/> Increase Capital Expenditures |
| <input checked="" type="checkbox"/> Existing Staff Time Required | <input type="checkbox"/> Decrease Capital Expenditures |
| <input type="checkbox"/> Increase Operating Expenditures
(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues |
| <input type="checkbox"/> Absorbed Within Agency's Budget | <input type="checkbox"/> Decrease Capital Revenues |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget | |
| <input type="checkbox"/> Decrease Operating Expenditures | <input type="checkbox"/> Use of contingent funds |
| <input type="checkbox"/> Increase Operating Revenues | |
| <input type="checkbox"/> Decrease Operating Revenues | |

Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	
	Revenue	0	
	Net Cost	0	
Capital Improvement Budget	Expenditure		
	Revenue		
	Net Cost		

DESCRIPTION OF FISCAL EFFECT

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated.¹ If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.
 - A. A resolution in support of various State Assembly and Senate Bills related to mental health service in Milwaukee County.
 - B. N/A
 - C. N/A
 - D. No assumptions made.

Department/Prepared By CB/ Weddle

Authorized Signature _____

Did DAS-Fiscal Staff Review? Yes No

Did CBDP Review?² Yes No Not Required

¹ If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

² Community Business Development Partners' review is required on all professional service and public work construction contracts.